

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMMF	08-14-01	
O.I.P.E. CLASSIFIER		21	8/20/01
FORMALITY REVIEW	TB	JC 1108	09-17-01
RESPONSE FORMALITY REVIEW	CR	1109	11-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1 1 ✓ =	8/20/01
2 2 ✓	
3 3 ✓	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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